



State of Louisiana

Louisiana Department of Health Bureau of Health Services Financing

MEMORANDUM

DATE:

April 1, 2024

TO:

All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM:

Kimberly Sullivan, Medicaid Executive Director

SUBJECT: Louisiana Medicaid Pharmacy Point of Sale Diagnosis

Code Requirement - April 2024

Effective April 1, 2024, the Louisiana Medicaid Fee for Service (FFS) Pharmacy Program and Managed Care Organizations (MCOs), in consultation with the Drug Utilization Review (DUR) Board, will implement new Point of Sale (POS) diagnosis code requirements for select medications. The diagnosis code requirement applies to pharmacy claims submitted to Gainwell for FFS and to Magellan for MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Humana Healthy Horizons, Louisiana Healthcare Connections, and UnitedHealthcare).

Point of Sale Diagnosis Code Requirement

A pharmacy claim will deny at Point of Sale (POS) when there is a missing or invalid diagnosis code submitted in NCPDP field 424-DO (Diagnosis Code) with:

Denial from Gainwell (FFS Only): NCPDP rejection code 39 (Missing/Invalid ICD-10-CM diagnosis code) mapped to EOB Code 575 (Missing/Invalid ICD-10-CM diagnosis code).

Denial from Magellan (MCO Only): NCPDP denial code 39 (Missing/Invalid ICD-10-

CM diagnosis

code) or NCPDP rejection code 80 (Diagnosis code submitted does not meet drug coverage criteria).

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Pharmacy claims for the following select medications in the chart require a diagnosis code at POS.

Medication	Diagnosis Description	Diagnosis Code	
Cantharidin (Ycanth TM)	Molluscum Contagiosum	B08.1	
Cipaglucosidase alfa-atga IV injection (Pombiliti™) + Miglustat (Opfolda™)	Pompe Disease	E74.02	
Palovarotene (Sohonos TM)	Fibrodysplasia Ossificans Progressiva	M61.1*	
	Agitation or Aggression or Irritability in Pervasive Developmental Disorder (PDD)/Autistic Disorder		
	† Negative Symptoms of PDD (Description is specific for olanzapine/fluoxetine)	F84.*	
	‡ Aggression or Irritability in PDD with Depression (Description is specific for perphenazine/amitriptyline)		
	Bipolar Disorder, Agitation or Psychoses in Bipolar Disorder, Agitation or Psychoses in Other Episodic Mood Disorders		
	† Bipolar Depression, Negative Symptoms of Psychoses in Bipolar Disorder, Negative Symptoms of Psychoses in Other Episodic Mood Disorders (Description is specific for olanzapine/fluoxetine)	F30.*, F31.*, F32.8*, F34.8*, F34.9, F39	
	Bipolar Disorder with Depression, Other Episodic Mood Disorders with Depression (Description is specific for perphenazine/amitriptyline)		
	Delusions, Dementia, Psychoses or Agitation in Delusions, Dementia, Psychoses	F01.*, F02.*, F03.*, F04, F05, F06.0, F06.2, F06.30, F06.31, F06.32, F06.33, F06.34, F06.8, F10.150, F10.151, F10.250, F10.2 F10.26, F10.94, F10.950, F10.951, F10.96, F10.97, F11.121, F11.150, F11.151, F11.221, F11.250, F11.251, F11.921, F11.950, F11.951, F12.121, F12.150, F12.151, F12.221, F12.250, F12.251,	
	† Negative Symptoms of Delusions, Dementia or Psychoses	F12.921, F12.950, F12.951, F13.121, F13.150, F13.151, F13.221, F13.250, F13.251, F13.27, F13.921, F13.950, F13.951, F13.97	
	(Description is specific for olanzapine/fluoxetine)	F14.121, F14.150, F14.151, F14.221, F14.250, F14.251, F14.921, F14.950, F14.951, F15.121, F15.150, F15.151, F15.221, F15.250,	
	Delusions with Depression, Dementia with Depression, Psychoses with Depression (Description is specific for perphenazine/amitriptyline)	F15.251, F15.921, F15.950, F15.951, F16.121, F16.150, F16.151, F16.221, F16.250, F16.251, F16.921, F16.950, F16.951, F18.121, F18.150, F18.151, F18.17, F18.221, F18.250, F18.251, F18.27, F18.921, F18.950, F18.951, F18.97, F19.121, F19.150, F19.151, F19.17, F19.221, F19.250, F19.251, F19.27, F19.921, F19.950, F19.951, F19.97, F22, F23, F24, F28, F29, F32.3, F33.3, F44.89	
	Agitation or Psychoses in Major Depressive Disorder		
	† Major Depressive Disorder, Negative Symptoms of Psychoses in Major Depressive Disorder (Description is specific for olanzapine/fluoxetine)	F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.9, F33.0, F33.1, F33.2, F33.3, F33.40, F33.41, F33.42, F33.8, F33.9	
	¥ Major Depressive Disorder		
	Schizophrenia or Schizoaffective Disorder or Agitation in Schizophrenia or Schizoaffective Disorder		
	† Negative Symptoms of Schizophrenia or Schizoaffective Disorder (Description is specific for olanzapine/fluoxetine)	F20.*, F25.*	
	‡ Schizophrenia with Depression, Schizoaffective Disorder with Depression (Description is specific for perphenazine/amitriptyline)	·	
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^{*} Any number or letter or combination of up to four numbers and letters of an assigned ICD-10 diagnosis code

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Additional Information:

FFS and MCO: Most pharmacy claim denials can be overridden in emergency situations at Point of Sale. If it is necessary to override the claim, "03" can be entered in NCPDP field 418-DI (Level of Service).

Refer to http://ldh.la.gov/assets/HealthyLa/Pharmacy/PDL.pdf for the PDL, which is inclusive of the Louisiana Uniform Prescription Drug Prior Authorization Form, medication list, and criteria.

If you have questions about the content of this memo, you may contact the FFS pharmacy help desk by phone at (800) 437-9101.

FFS pharmacy claims should be submitted to Gainwell Technologies. MCO pharmacy claims should be submitted to Magellan.

If you have questions about pharmacy claims billing, you may contact the appropriate plan at their pharmacy help desk listed in the chart below.

Healthcare Provider	Pharmacy Help Desk	Pharmacy Help Desk Phone Number
Aetna, AmeriHealth Caritas, Healthy Blue, Humana Healthy Horizons, Louisiana Healthcare Connections, UnitedHealthcare	Magellan	(800) 424-1664
Fee for Service	Gainwell Technologies	(800) 648-0790

Please forward this notice to other providers to assist with notification. Your continued cooperation and support of the Louisiana Medicaid Program efforts to coordinate care and improve health are greatly appreciated.

KS/MBW/GJS

c: Healthy Louisiana Plans Melwyn B. Wendt Gainwell Technologies Magellan